Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF CALIFORNIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

## Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on Robert Michelle your government-issued First name First name picture identification (for example, your driver's James Ann license or passport). Middle name Middle name Bring your picture Kaiser Kaiser identification to your Last name and Suffix (Sr., Jr., II, III) Last name and Suffix (Sr., Jr., II, III) meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal xxx-xx-0975 xxx-xx-4357 Individual Taxpayer Identification number (ITIN)

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs			
5.	Where you live	2215 Avenida De Los Alumnos	If Debtor 2 lives at a different address:			
		Santa Clara, CA 95054  Number, Street, City, State & ZIP Code  Santa Clara	Number, Street, City, State & ZIP Code			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

	Debtor 1 Robert James Kaiser Debtor 2 Michelle Ann Kaiser			Case number (if known)			
Par	t 2: Tell the Court About	our Bankruptcy	Case				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		Chapter 13					
8.	How you will pay the fee	about how order. If yo a pre-print	you may pay. Typically, if you a ur attorney is submitting your p ad address.	are paying the fee payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money shalf, your attorney may pay with a credit card or check with tion, sign and attach the Application for Individuals to Pay		
		The Filing  ☐ I request to but is not reapplies to the second of the se	Fee in Installments (Official For hat my fee be waived (You m equired to, waive your fee, and our family size and you are un	rm 103A).  ay request this optile may do so only if you had be to pay the fee	ion only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the last 8 years?	■ No.					
		Distric	et	When	Case number		
		Distri		When	Case number		
		Distri	et	When	Case number		
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No □ Yes.					
		Debto	r		Relationship to you		
		Distri	et	When	Case number, if known		
		Debto	r		Relationship to you		
		Distri		When	Case number, if known		
11.	Do you rent your	□ No. Go t	o line 12.				
	residence?	■ Yes. Has	your landlord obtained an evic	tion judgment agai	nst you and do you want to stay in your residence?		
			No. Go to line 12.				
		_	Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	าt About an Evictio	n Judgment Against You (Form 101A) and file it with this		

	otor 1 Robert James Kais otor 2 Michelle Ann Kais			Case number (if known)
Par	t 3: Report About Any Bu	sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	te & ZIP Code			
	separate sheet and attach it to this petition.		Check the appropriate bo	ox to describe your business:
			☐ Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
			lefined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
			☐ None of the above	Э
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropries deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proce in 11 U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Chap	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?	
identifiable hazard to public health or safety?  Or do you own any property that needs immediate attention?  If immediate attention is needed, why is it needed?		If immediate attention is needed, why is it needed?		
			,,	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- •			Number, Street, City, State & Zip Code

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Case number (if known)

### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Robert James Kai tor 2 Michelle Ann Kais				Case number (if known)		
Part	6: Answer These Quest	ions for R	eporting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consindividual primarily for a person			fined in 11 U.S.C. § 101(8) as "incurred by an	
			☐ No. Go to line 16b.	•			
			Yes. Go to line 17.				
		16b.	Are your debts primarily busi money for a business or investi				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe	e that are not consur	mer debts or busine	ess debts	
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7.	Go to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ Yes.	I am filing under Chapter 7. Do are paid that funds will be avail			perty is excluded and administrative expenses?	
			□ No				
			Yes				
18.	How many Creditors do you estimate that you owe?	<b>■</b> 1-49		<b>1</b> ,000-5,000	1	<b>2</b> 5,001-50,000	
		□ 50-99	)	<u></u> 5001-10,000		<u> </u>	
		☐ 100-1 ☐ 200-9		□ 10,001-25,0	000	☐ More than100,000	
19.	How much do you estimate your assets to	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion	
	be worth?		01 - \$100,000	□ \$10,000,001 □ \$50,000,001		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million			01 - \$500 million	☐ More than \$50 billion	
20.	How much do you estimate your liabilities	□ \$0 - \$		<b>\$1,000,001</b>		□ \$500,000,001 - \$1 billion	
	to be?		001 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion	
Part	7: Sign Below		·				
	you	I have ex	camined this petition, and I declar	re under penalty of p	perjury that the info	rmation provided is true and correct.	
						e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.	
			rney represents me and I did not nt, I have obtained and read the r			ot an attorney to help me fill out this	
		I request	request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			cy case can result in fines up to			or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519	
			ert James Kaiser		/s/ Michelle An		
			James Kaiser e of Debtor 1		Michelle Ann K Signature of Debt		
		Executed	October 25, 2017  MM / DD / YYYY			<b>ctober 25, 2017</b> M / DD / YYYY	

Debtor 1 Robert James K Debtor 2 Michelle Ann Ka		Cas	se number (if known)
For your attorney, if you are represented by one f you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that and, in a case in which § 707(b)(4)(D) applies, ce schedules filed with the petition is incorrect.	States Code, and have of I have delivered to the ortify that I have no known	debtor(s) the notice required by 11 U.S.C. § 342(b) wledge after an inquiry that the information in the
	/s/ W. Kirk Moore Signature of Attorney for Debtor	Date	October 25, 2017 MM / DD / YYYY
	W. Kirk Moore Printed name  Law Offices of W. Kirk Moore, Inc. Firm name  586 N. First St. Suite 202 San Jose, CA 95112 Number Street City State & ZIP Code		

Email address

Contact phone

244764 Bar number & State

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Fill in this infor	Fill in this information to identify your case:						
Debtor 1	Robert James Ka	iser					
	First Name	Middle Name	Last Name				
Debtor 2	Michelle Ann Kais	ser					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF CALIFORNIA				
Case number							
(if known)					Check if this is an		
					amended filing		

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	450,501.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	450,501.00
Part	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	25,853.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	18,090.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	147,713.00
	Your total liabilities	\$	191,656.00
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,091.40
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,891.40
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Summary of Your Assets and Liabilities and Certain Statistical Information Official Form 106Sum

page 1 of 2

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8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

14,303.67

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	18,090.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	31,712.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	49,802.00

Fill in this	s information to identify	your case a	nd this filing:			
Debtor 1	Robert Jame	es Kaiser				
	First Name		Middle Name	Last Name		
Debtor 2	Michelle An	n Kaiser				
(Spouse, if fil	ing) First Name		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for	the: NOR1	THERN DISTRICT OF CALI	FORNIA		
Case num	nber					☐ Check if this is an
						amended filing
Officia	al Form 106A/E	3				
<u>Sche</u>	dule A/B: P	roperty	У			12/15
hink it fits nformation Answer eve	best. Be as complete and a. If more space is needed, ery question.	accurate as po attach a separ	List an asset only once. If an possible. If two married people rate sheet to this form. On the or Other Real Estate You Own	are filing together, both are top of any additional page	e equally responsible for su	pplying correct
	<u> </u>		st in any residence, building,			
_		juitable littere.	st in any residence, building, i	and, or similar property:		
No. G	io to Part 2.					
☐ Yes.	Where is the property?					
Part 2: Do	escribe Your Vehicles					
someone e		vehicle, also	interest in any vehicles, w report it on Schedule G: Ex hicles, motorcycles			ancies you own that
Yes						
3.1 Mal	ke: Jeep Grand Cheroke	<u> </u>	Who has an interest in the	property? Check one	Do not deduct secured cla	•
Mo			Debtor 1 only		Creditors Who Have Clair	
Yea	ar: <b>2013</b>		Debtor 2 only		Current value of the	Current value of the
App	proximate mileage:	89k	■ Debtor 1 and Debtor 2 or	ıly	entire property?	portion you own?
Oth	er information:		☐ At least one of the debto	rs and another		
			Check if this is commu (see instructions)	nity property	\$15,430.00	\$15,430.00
3.2 Mal			Who has an interest in the	property? Check one	Do not deduct secured cla	d claims on Schedule D:
Mod		<u> </u>	☐ Debtor 1 only		Creditors Who Have Clair	ms Secured by Property.
Yea		28k	Debtor 2 only		Current value of the	Current value of the
	oroximate mileage: ner information:		■ Debtor 1 and Debtor 2 or □ At least one of the debto	•	entire property?	portion you own?
Oth	ici iniUmatium.		At least one of the debto	rs and another		
			Check if this is commu (see instructions)	nity property	\$14,854.00	\$14,854.00

Debtor 1 Debtor 2	Robert James Kaiser Michelle Ann Kaiser	Case number	(if known)	
	eraft, aircraft, motor homes, ATVs and other recreational vehicles, es: Boats, trailers, motors, personal watercraft, fishing vessels, snown		ies	
■ No				
☐ Yes				
	ne dollar value of the portion you own for all of your entries from you have attached for Part 2. Write that number here			\$30,284.00
Part 3: D	escribe Your Personal and Household Items			
Do you o	wn or have any legal or equitable interest in any of the following	items?	<b>portion</b> Do not o	value of the you own? deduct secured or exemptions.
<i>Exam</i> µ □ No	hold goods and furnishings  les: Major appliances, furniture, linens, china, kitchenware  . Describe			
_ 103	. Describe			
	Misc. Household Goods and Furnishings			\$1,500.00
□ No	<ul> <li>conics</li> <li>coles: Televisions and radios; audio, video, stereo, and digital equipmer including cell phones, cameras, media players, games</li> <li>d. Describe</li> </ul>	nt; computers, printers, scanners	s; music collections; ele	ctronic devices
	Misc. Electronics		1	\$350.00
Examp	cibles of value  oles: Antiques and figurines; paintings, prints, or other artwork; books, other collections, memorabilia, collectibles  . Describe	pictures, or other art objects; sta	amp, coin, or baseball c	ard collections;
9. <b>Equip</b> r	nent for sports and hobbies  bles: Sports, photographic, exercise, and other hobby equipment; bicycomusical instruments	cles, pool tables, golf clubs, skis	; canoes and kayaks; c	arpentry tools;
	. Describe			
10. <b>Firea</b> Exan	rms apples: Pistols, rifles, shotguns, ammunition, and related equipment			
	. Describe			
□ No	aples: Everyday clothes, furs, leather coats, designer wear, shoes, acc	essories		
■ Yes	. Describe			
	Clothes			\$650.00
□ No	ry nples: Everyday jewelry, costume jewelry, engagement rings, wedding Describe	rings, heirloom jewelry, watches	s, gems, gold, silver	

Debtor 2	Michelle An	II Naisei		Case number (if known)	
		Misc. Jewelry			\$1,600.00
Exa ■ No	-farm animals imples: Dogs, cats, oes. Describe	birds, horses			
■ No	-		ot already list, including any h	ealth aids you did not list	
			rt 3, including any entries for p		\$4,100.00
Part 4:	Describe Your Finan	cial Assets			
		egal or equitable interest in a	any of the following?		Current value of the portion you own?
					Do not deduct secured claims or exemptions.
	mples: Money you	have in your wallet, in your hon	ne, in a safe deposit box, and on		claims or exemptions.
Exa □ No	mples: Money you			hand when you file your petitio  Cash	claims or exemptions.
Exa  □ No  ■ Ye  17. Depr Exa	osits of money mples: Money you osits of money mples: Checking, s institutions.	avings, or other financial accou		<b>Cash</b> es in credit unions, brokerage he	claims or exemptions. n \$155.00
Exa  □ No  ■ Ye  17. Depr Exa	osits of money institutions.	avings, or other financial accou	unts; certificates of deposit; share with the same institution, list each	<b>Cash</b> es in credit unions, brokerage he	claims or exemptions.  n \$155.00  ouses, and other similar
Exa  □ No  ■ Ye  17. Depr Exa	osits of money institutions.	avings, or other financial accou If you have multiple accounts v	unts; certificates of deposit; share with the same institution, list each	<b>Cash</b> es in credit unions, brokerage he	claims or exemptions. n \$155.00
Exa  □ No  ■ Ye  17. Depr Exa	osits of money institutions.	avings, or other financial accou If you have multiple accounts v	unts; certificates of deposit; share with the same institution, list each	<b>Cash</b> es in credit unions, brokerage he	claims or exemptions.  n \$155.00  ouses, and other similar
Exa  □ No  ■ Ye  17. Depr Exa	osits of money institutions.	avings, or other financial accounts with the second of the	unts; certificates of deposit; share with the same institution, list each Institution name:  US Bank	<b>Cash</b> es in credit unions, brokerage he	claims or exemptions.  \$155.00  ouses, and other similar  \$125.00

■ No

☐ Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

■ No

☐ Yes. Give specific information about them.....

Name of entity:

% of ownership:

page 3 Official Form 106A/B Schedule A/B: Property

	ebtor 1 Robert Jame ebtor 2 Michelle Ann		Case number (if known)	
20.	Negotiable instruments Non-negotiable instrum	include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	■ No □ Yes. Give specific info	ormation about them Issuer name:		
21.	Retirement or pension  Examples: Interests in I		403(b), thrift savings accounts, or other pension or profit-sharing pla	ans
	Yes. List each accoun	nt separately.  Type of account:	Institution name:	
		401(k)	Fidelity	\$12,012.00
		Pension	Fidelity	\$38,446.00
		HSA	Fidelity	\$355.00
		IRA	TIAA	\$95,995.00
		IRA	Northwestern Mutual	\$232,443.00
	■ Yes	Rental deposit	Institution name or individual:  Security deposit with Eugene Blefari -	\$0.00
		•	landlord has possessory lien \$3,500.00	·
23.	Annuities (A contract fo	or a periodic payment of mon	ney to you, either for life or for a number of years)	
		suer name and description.		
24.	26 U.S.C. §§ 530(b)(1), §		qualified ABLE program, or under a qualified state tuition prog	ram.
	■ No □ Yes In:	stitution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Trusts, equitable or fut ■ No □ Yes. Give specific info		other than anything listed in line 1), and rights or powers exerc	isable for your benefit
26.	Examples: Internet dom		and other intellectual property eds from royalties and licensing agreements	
	■ No □ Yes. Give specific info	ormation about them		
	Examples: Building per	and other general intangib mits, exclusive licenses, coo	les perative association holdings, liquor licenses, professional licenses	;
	■ No □ Yes. Give specific infe	ormation about them		
Mo	oney or property owed t	to you?		Current value of the portion you own?

Do not deduct secured

Debtor 1 Debtor 2	Robert James Kaiser Michelle Ann Kaiser	Case number (if known)	
			claims or exemptions.
■ No	funds owed to you  Give specific information about them, including whether you already filed the	ne returns and the tax years	
■ No	v support ples: Past due or lump sum alimony, spousal support, child support, mainte Give specific information	nance, divorce settlement, property	v settlement
Exam <sub>i</sub> ■ No	amounts someone owes you  ples: Unpaid wages, disability insurance payments, disability benefits, sick penefits; unpaid loans you made to someone else	pay, vacation pay, workers' compe	nsation, Social Security
31. <b>Interes</b> <i>Exam</i> □ No	Give specific information  sts in insurance policies  ples: Health, disability, or life insurance; health savings account (HSA); cred	dit, homeowner's, or renter's insura	nce
■ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
	Term Life Insurance with Northwestern Mutual	Wife	\$0.00
	Whole Life Insurance with Northwestern Mutual	Wife	\$26,794.00
	Term Life Insurance with employer - no value to debtor		\$0.00
If you somed	Interest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance prone has died.  Give specific information	olicy, or are currently entitled to rec	eive property because
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or made ples: Accidents, employment disputes, insurance claims, or rights to sue  Describe each claim	e a demand for payment	
■ No	contingent and unliquidated claims of every nature, including counter  Describe each claim	claims of the debtor and rights to	o set off claims
■ No	nancial assets you did not already list  Give specific information		
36. <b>Add</b>	the dollar value of all of your entries from Part 4, including any entries art 4. Write that number here		\$416,117.00
Do. ( 5	agariba Any Rusinaga Balatad Branasty Vay Own or Haya an Interset In List any	real actate in Part 4	

Debt Debt			Case number (if known)	
37. <b>D</b>	o you own or have any legal or equitable interest in any business-relate	d property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>C</b>	o you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership  No	•		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$30,284.00		
57.	Part 3: Total personal and household items, line 15	\$4,100.00		
58.	Part 4: Total financial assets, line 36	\$416,117.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$450,501.00	Copy personal property total	\$450,501.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$450,501.00

Fill in this information to identify your case:					
Debtor 1	Robert James Ka	iser			
	First Name	Middle Name	Last Name		
Debtor 2	Michelle Ann Kais	ser			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF CALIFORNIA		
Case number					
(if known)					Check if this is an
					amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

|--|

	■ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2013 Jeep Grand Cherokee Overland SUV 89k miles	\$15,430.00		\$3,777.00	C.C.P. § 703.140(b)(2)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2014 MINI Cooper Clubman 28k miles Line from Schedule A/B: 3.2	\$14,854.00		\$654.00	C.C.P. § 703.140(b)(2)
	Line Holli Schedule AV.B. 3.2			100% of fair market value, up to any applicable statutory limit	
	Misc. Household Goods and Furnishings	\$1,500.00		\$1,500.00	C.C.P. § 703.140(b)(3)
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	Misc. Electronics Line from Schedule A/B: 7.1	\$350.00		\$350.00	C.C.P. § 703.140(b)(3)
	Elle Holli Genedale Al D. 7.1			100% of fair market value, up to any applicable statutory limit	
	Clothes Line from Schedule A/B: 11.1	\$650.00		\$650.00	C.C.P. § 703.140(b)(3)
	Line from <i>Schedule PVD</i> . 1111			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Best Case Bankruptcy

tor 2 Michelle Ann Kaiser			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	from Check only one box for each exemption.		
Misc. Jewelry Line from Schedule A/B: 12.1	\$1,600.00		\$1,600.00	C.C.P. § 703.140(b)(4)
and norm deficiency p. 1211			100% of fair market value, up to any applicable statutory limit	
Cash ine from <i>Schedule A/B</i> : <b>16.1</b>	\$155.00		\$155.00	C.C.P. § 703.140(b)(5)
and from Goriedate / V.Z. 1911			100% of fair market value, up to any applicable statutory limit	
Checking #1143: US Bank ine from Schedule A/B: 17.1	\$125.00		\$125.00	C.C.P. § 703.140(b)(5)
ine nom <i>Schedule A/B</i> . 1111			100% of fair market value, up to any applicable statutory limit	
Savings: US Bank ine from Schedule A/B: 17.2	\$5.00		\$5.00	C.C.P. § 703.140(b)(5)
ille Hotti Schedule A/D. 11.2			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of the West ine from Schedule A/B: 17.3	\$4,287.00		\$4,287.00	C.C.P. § 703.140(b)(5)
ine nom <i>Schedule A/B.</i> 11.3			100% of fair market value, up to any applicable statutory limit	
Savings: Bank of the West inches inch	\$5,500.00		\$5,500.00	C.C.P. § 703.140(b)(5)
ine nom <i>Schedule A/B.</i> 111.4			100% of fair market value, up to any applicable statutory limit	
101(k): Fidelity	\$12,012.00		\$12,012.00	C.C.P. § 703.140(b)(10)(E)
ine from <i>Schedule A/B</i> : <b>21.1</b>			100% of fair market value, up to any applicable statutory limit	
Pension: Fidelity ine from Schedule A/B: 21.2	\$38,446.00		\$38,446.00	C.C.P. § 703.140(b)(10)(E)
and nom Schedule A/D. 21.2			100% of fair market value, up to any applicable statutory limit	
ISA: Fidelity ine from Schedule A/B: 21.3	\$355.00		\$355.00	C.C.P. § 703.140(b)(5)
ino nom <i>Gonedule Arb.</i> <b>21.0</b>			100% of fair market value, up to any applicable statutory limit	
RA: TIAA ine from <i>Schedule A/B</i> : <b>21.4</b>	\$95,995.00		\$95,995.00	C.C.P. § 703.140(b)(10)(E)
ine from Goriedale A/D. <b>21.4</b>			100% of fair market value, up to any applicable statutory limit	
RA: Northwestern Mutual ine from Schedule A/B: 21.5	\$232,443.00		\$232,443.00	C.C.P. § 703.140(b)(10)(E)
Goriodaio , v.B. = 110			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

**Robert James Kaiser** Debtor 1 Michelle Ann Kaiser Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Rental deposit: Security deposit with C.C.P. § 703.140(b)(5) \$0.00 \$0.00 Eugene Blefari - landlord has possessory lien \$3,500.00 100% of fair market value, up to Line from Schedule A/B: 22.1 any applicable statutory limit **Term Life Insurance with** C.C.P. § 703.140(b)(7) \$0.00 \$0.00 **Northwestern Mutual** Beneficiary: Wife 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit Whole Life Insurance with C.C.P. § 703.140(b)(8) \$26,794.00 \$14,325.00 **Northwestern Mutual** Beneficiary: Wife 100% of fair market value, up to Line from Schedule A/B: 31.2 any applicable statutory limit Whole Life Insurance with C.C.P. § 703.140(b)(5) \$26,794.00 \$12,469.00 **Northwestern Mutual Beneficiary: Wife** 100% of fair market value, up to Line from Schedule A/B: 31.2 any applicable statutory limit Term Life Insurance with employer -C.C.P. § 703.140(b)(7) \$0.00 \$0.00 no value to debtor Line from Schedule A/B: 31.3 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Official Form 106C

Yes

Fill in this informat	ion to identify vo	ur case:			
Debtor 1	Robert James I				
-	First Name	Middle Name Last Name		-	
Debtor 2	Michelle Ann K			-	
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bankı	ruptcy Court for the	NORTHERN DISTRICT OF CALIFORNIA		-	
Case number					
(if known)					if this is an
				ameno	led filing
Official Form	106D				
		s Who Have Claims Secured	l by Propert	v	12/15
				<u> </u>	
		If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
1. Do any creditors ha	ve claims secured b	y your property?			
□ No. Check th	is box and submit	this form to the court with your other schedules. Yo	u have nothing else t	to report on this form.	
Yes. Fill in al	l of the information	below.			
Part 1: List All S	ecured Claims				
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	, and the second	value of collateral.	claim	if any
2.1 Ally Financi Creditor's Name	<u>aı</u>	Describe the property that secures the claim:  2013 Jeep Grand Cherokee	\$11,653.00	\$15,430.00	\$0.00
Attn. Donku	unto.	Overland SUV 89k miles			
Attn: Bankre Po Box 3809		As of the date you file, the claim is: Check all that			
Bloomingto		apply.  Contingent			
Number, Street, Cit	y, State & Zip Code	☐ Unliquidated			
Who owes the debt	Observans	Disputed			
Who owes the debt	Check one.	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or section).	urod		
Debtor 2 only		car loan)	area		
■ Debtor 1 and Debto	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit			
Check if this clain community debt	n relates to a	Other (including a right to offset) Auto Loan			
community debt					
	Opened				
	12/12 Last Active				
Date debt was incurre	7/25/17	Last 4 digits of account number 2595			
2.2 Wells Fargo Services	Dealer	Describe the property that secures the claim:	\$14,200.00	\$14,854.00	\$0.00
Creditor's Name		2014 MINI Cooper Clubman 28k	, ,		
		miles			
DO Poy 406	E-7	As of the date you file, the claim is: Check all that			
PO Box 196 Irvine, CA 9	-	apply.  ☐ Contingent			
	y, State & Zip Code	☐ Unliquidated			
	•	☐ Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or secucar loan)	ured		
■ Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	=	☐ Judgment lien from a lawsuit			

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

Debtor 1	Robert Jar	nes Kaiser		Cas	se number ( <sub>if know</sub> )	
	First Name	Middle Name	Last Name	_		
Debtor 2	Michelle A	nn Kaiser				
	First Name	Middle Name	Last Name	<del></del>		
	if this claim re unity debt	lates to a	Other (including a right to offset)	Auto Loan		
Date debt	was incurred	8/2017	Last 4 digits of account nun	1264		
		•	mn A on this page. Write that nur		\$25,853.00	
	the last page o		dollar value totals from all pages		\$25,853.00	

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

Debtor 1 Robert James Kaiser				
First Name Mi	ddle Name Last Name			
Debtor 2 Michelle Ann Kaiser				
(Spouse if, filing) First Name Mi	ddle Name Last Name			
United States Bankruptcy Court for the: NORT	HERN DISTRICT OF CALIFORNIA			
Case number				
(if known)				if this is an
			amend	ed filing
Official Form 106E/F				
Schedule E/F: Creditors Who Ha	ave Unsecured Claims			12/15
Be as complete and accurate as possible. Use Part 1 f		or creditors with NON	PRIORITY claims I i	
Schedule D: Creditors Who Have Claims Secured by P eft. Attach the Continuation Page to this page. If you l name and case number (if known).				
Part 1: List All of Your PRIORITY Unsecured	Claims			
1. Do any creditors have priority unsecured claims	against you?			
☐ No. Go to Part 2.				
■ Yes.				
<ol> <li>List all of your priority unsecured claims. If a crecidentify what type of claim it is. If a claim has both pri possible, list the claims in alphabetical order according Part 1. If more than one creditor holds a particular claim.</li> </ol>	ority and nonpriority amounts, list that claim here a ng to the creditor's name. If you have more than tw	nd show both priority a	nd nonpriority amoun	ts. As much as
(For an explanation of each type of claim, see the ins				
(i di ali dipianator di dadii typo di dianii, dod ilid ilid		Total claim	Priority	
			amount	Nonpriority amount
2.1 Attorney General	Last 4 digits of account number	\$0.00	amount \$0.00	•
Priority Creditor's Name		\$0.00		amount
Priority Creditor's Name U.S. Dept. of Justice	Last 4 digits of account number  When was the debt incurred?	\$0.00		amount
Priority Creditor's Name		\$0.00		amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044	When was the debt incurred?			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code	When was the debt incurred?  As of the date you file, the claim is: Check a			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim is: Check a  ☐ Contingent			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.	When was the debt incurred?  As of the date you file, the claim is: Check a Contingent Unliquidated			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	When was the debt incurred?  As of the date you file, the claim is: Check a Contingent Unliquidated Disputed			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred?  As of the date you file, the claim is: Check a Contingent Unliquidated Disputed Type of PRIORITY unsecured claim:			amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only	As of the date you file, the claim is: Check a Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	ill that apply		amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	When was the debt incurred?  As of the date you file, the claim is: Check a Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the	Ill that apply		amount
Priority Creditor's Name U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044 Number Street City State Zlp Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another	As of the date you file, the claim is: Check a Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations	Il that apply government u were intoxicated		amount

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 12

Entered: 10/25/17 11:36:06 Page 21 of Best Case Bankruptcy Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Case: 17-52589 Doc# 1 Filed: 10/25/17

**Notice Only** 

Debtor 1	Robert James Kaiser
Debtor 2	Michelle Ann Kaiser

Case number (if know)

2.2	Chief Counsel	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name	When was the debt incurred?			
	Franchise Tax Board c/o General Counsel Section	when was the dept incurred?			
	PO Box 1720 MS: A-260				
	Rancho Cordova, CA 95741-1720				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	apply		
	_	Contingent			
	Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	$\square$ At least one of the debtors and another	☐ Domestic support obligations			
	■ Check if this claim is for a community debt	Taxes and certain other debts you owe the gover			
	Is the claim subject to offset?	Claims for death or personal injury while you wer	e intoxicated		
	■ No	Other. Specify			
	Yes	Notice Only			
2.3	Franchise Tax Board	Last 4 digits of account number	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name		Ψ0.00		40.00
	PIT Bankruptcy MS: A-340	When was the debt incurred?			
	PO Box 2952 Sacramento, CA 95812				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that	apply		
	Who incurred the debt? Check one.	☐ Contingent	,		
	☐ Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	<u> </u>	☐ Domestic support obligations			
	At least one of the debtors and another	_			
	■ Check if this claim is for a community debt	Taxes and certain other debts you owe the gover			
	Is the claim subject to offset?	Claims for death or personal injury while you wer	e intoxicated		
	■ No	Other. Specify Notice Only			
	Yes	Notice Only			
2.4	Internal Revenue Service	Last 4 digits of account number	\$12,794.00	\$12,794.00	\$0.00
	Priority Creditor's Name  Centralized Insolvency Division	When was the debt incurred? 2015			
	P.O. Box 7346	when was the dept incurred: 2013			
	Philadelphia, PA 19101				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that	apply		
	Who incurred the debt? Check one.	☐ Contingent			
	☐ Debtor 1 only	☐ Unliquidated			
	☐ Debtor 2 only	☐ Disputed			
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	■ Check if this claim is for a community debt	Taxes and certain other debts you owe the gover	rnment		
	Is the claim subject to offset?	☐ Claims for death or personal injury while you wer	e intoxicated		
	■ No	☐ Other. Specify			
	Yes	Income Taxes			

Official Form 106 E/F

Debtor 1 Robert James Kaiser Debtor 2 Michelle Ann Kaiser		Case number	(if know)		
2.5 Internal Revenue Service	Last 4 digits of account number		\$5,296.00	\$5,296.00	\$0.00
Priority Creditor's Name  Centralized Insolvency Division  P.O. Box 7346	When was the debt incurred?	2016			
Philadelphia, PA 19101  Number Street City State Zlp Code	As of the date you file, the clain	is: Check all that ap	ply		
Who incurred the debt? Check one.	☐ Contingent		r-7		
Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt  Is the claim subject to offset?	■ Taxes and certain other debts □ Claims for death or personal ir	, ,			
■ No	☐ Other. Specify				
Yes	Income Ta	ixes			
2.6 U.S. Attorney	Last 4 digits of account number		\$0.00	\$0.00	\$0.00
Priority Creditor's Name Northern District of California 10th Floor, Federal Building Box 10502, 450 Golden Gate Ave.	When was the debt incurred?				
San Francisco, CA 94102  Number Street City State Zlp Code	As of the date you file, the clain	is: Check all that an	nly		
Who incurred the debt? Check one.	☐ Contingent	or on our an area ap	P-)		
☐ Debtor 1 only	☐ Unliquidated				
☐ Debtor 2 only	☐ Disputed				
■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
☐ At least one of the debtors and another	☐ Domestic support obligations				
■ Check if this claim is for a community debt	Taxes and certain other debts	you owe the governm	nent		
Is the claim subject to offset?	Claims for death or personal in	=			
■ No	☐ Other. Specify				

### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of

**Notice Only** 

**Total claim** 

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Debtor Debtor	Robert James Kaiser Michelle Ann Kaiser		Case number (if know)	
4.1	Aes/Nct Nonpriority Creditor's Name	Last 4 digits of account number	0003	\$7,193.00
	Aes/Ddb Po Box 8183 Harrisburg, PA 17105	When was the debt incurred?	Opened 8/10/07 Last Active 7/07/17	
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	1	
4.2	Aes/Nct	Last 4 digits of account number	0002	\$6,142.00
4.2	Nonpriority Creditor's Name Aes/Ddb		Opened 4/12/07 Last Active	φ0,142.00
	Po Box 8183 Harrisburg, PA 17105 Number Street City State Zlp Code	When was the debt incurred?	7/07/17	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан that арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only  ■ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify		
		Educationa	ıl	
4.3	Aes/Nct Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$5,893.00
	Aes/Ddb Po Box 8183 Harrisburg, PA 17105	When was the debt incurred?	Opened 11/16/06 Last Active 7/07/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt	<ul><li>■ Student loans</li><li>□ Obligations arising out of a sepa</li></ul>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	-	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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Educational

Debto	or 2 Michelle Ann Kaiser		Case number (if know)	
4.4	Aes/nvi/jt	Last 4 digits of account number	0005	\$7,316.00
	Nonpriority Creditor's Name	_	On an all 0/00/00 L and Anti	
	Pob 61047 Harrisburg, PA 17106	When was the debt incurred?	Opened 9/03/08 Last Active 7/05/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐Yes	Other. Specify		
		Educationa	nl	
4.5	Aes/nvi/jt	Last 4 digits of account number	0004	\$5,168.00
	Nonpriority Creditor's Name	_		. ,
	Pob 61047 Harrisburg, PA 17106	When was the debt incurred?	Opened 12/14/07 Last Active 7/07/17	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	Other. Specify	.1	
		Educationa	11	
4.6	Amex Nonpriority Creditor's Name	Last 4 digits of account number	7233	\$40,398.00
	Correspondence Po Box 981540	When was the debt incurred?	Opened 7/30/99 Last Active 07/17	
	El Paso, TX 79998  Number Street City State Zlp Code	As of the date you file the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	опоск ан шасарріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
		☐ Student loans		
	☐ Check if this claim is for a community	- Student loans		

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

■ Other. Specify Credit Card

debt

■ No

☐ Yes

Is the claim subject to offset?

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 $\hfill \Box$  Obligations arising out of a separation agreement or divorce that you did not report as priority claims

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 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor 2	Robert James Kaiser Michelle Ann Kaiser		Case number (if know)	
4.7	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	5261	\$5,580.00
	Nc4-105-03-14 Po Box 26012	When was the debt incurred?	Opened 12/92 Last Active 8/09/17	
	Greensboro, NC 27410 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
	Cbusasears	Last 4 digits of account number	7134	\$2,204.00
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup	When was the debt incurred?	Opened 03/77 Last Active 7/14/17	
	Po Box 790040 Saint Louis, MO 63179			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Charge Acc	count	
	Chase Card	Last 4 digits of account number	1901	\$12,804.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 04/14 Last Active 8/10/17	
-	Wilmington, DE 19850  Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•		
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin		
	□Yes	Other. Specify Credit Card		

Debtor Debtor	1 Robert James Kaiser 2 Michelle Ann Kaiser		Case number (if know)	
4.1 0	Chase Card	Last 4 digits of account number	8285	\$4,250.00
	Nonpriority Creditor's Name Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 08/13 Last Active 8/13/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	5612	\$2,673.00
	Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 07/15 Last Active 7/17/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 2	Citicards Cbna Nonpriority Creditor's Name	Last 4 digits of account number	7833	\$1,801.00
	Citicorp Credit Svc/Centralized Bankrupt Po Box 790040	When was the debt incurred?	Opened 5/23/15 Last Active 8/12/17	
	Saint Louis, MO 63179  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Credit Card	<u> </u>	

Schedule E/F: Creditors Who Have Unsecured Claims

2 Michelle Ann Kaiser		Case number (if know)	
Comenity Bank/Pottery Barn Nonpriority Creditor's Name	Last 4 digits of account number	5881	\$1,720.0
Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/13 Last Active 7/10/17	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
			*
Comenity/Crate & Barrell	Last 4 digits of account number	<u>0827</u>	\$2,427.
Nonpriority Creditor's Name Comenity Bank Po Box 182125	When was the debt incurred?	Opened 09/15 Last Active 7/10/17	
Columbus, OH 43218			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	_		
Debtor 2 only	Contingent		
	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing		
Yes	Other. Specify Charge Acc	count	
Credit First National Assoc	Last 4 digits of account number	9428	\$489.
Nonpriority Creditor's Name Attn: BK Credit Operations Po Box 81315	When was the debt incurred?	Opened 12/07/12 Last Active 8/10/17	
Cleveland, OH 44181  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	,	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Charge Acc	count	

Schedule E/F: Creditors Who Have Unsecured Claims

Michelle Ann Kaiser		Case number (if know)	
Discover Financial	Last 4 digits of account number	8802	\$12,462.00
Nonpriority Creditor's Name	_	Opened 05/44 Leet Active	
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 05/14 Last Active 8/16/17	
Number Street City State Zlp Code  Who incurred the debt? Check one.  Debtor 1 only	As of the date you file, the claim i	s: Check all that apply	
☐ Debtor 1 only	Пол		
Debtor 2 only	☐ Contingent		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated		
At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	l claim:	
	Student loans	i Claiii.	
■ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	a plans, and other similar debts	
		<b>51</b>	
☐ Yes	Other. Specify Credit Card		
Discover Financial	Last 4 digits of account number	3404	\$11,185.00
Nonpriority Creditor's Name	_		
Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 08/95 Last Active 7/28/17	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other Specify Credit Card		
Good Samaritan Hospital	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name 1225 WILSHIRE BLVD	When was the debt incurred?		
Los Angeles, CA 90017			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
Debtor 1 only			
Debtor 1 only  Debtor 2 only	☐ Contingent		
·	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?		ration agreement or divorce that you did not	
•	report as priority claims  Debts to pension or profit-sharin	a plane, and other similar debte	
■ No □ Yes			
	■ Other. Specify Notice Only	-	

Official Form 106 E/F Schedule E/F

Schedule E/F: Creditors Who Have Unsecured Claims

2 Michelle Ann Kaiser		Case number (if know)	
Nordstrom Signature Visa	Last 4 digits of account number	0988	\$5,389
Nonpriority Creditor's Name Colorado Service Center Po Box 6555 Englewood, CO 80155	When was the debt incurred?	Opened 11/94 Last Active 8/11/17	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
NPAS, Inc.	Last 4 digits of account number		\$(
Nonpriority Creditor's Name ONE PARK PLZ	When was the debt incurred?		<del>_</del>
Nashville, TN 37203  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	_		
Debtor 2 only	Contingent		
■ Debtor 1 and Debtor 2 only	Unliquidated		
☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d alaim.	
<u></u>	Student loans	d claim:	
■ Check if this claim is for a community debt  Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	ng plans, and other similar debts	
☐ Yes	Other. Specify Collection		
Paypal, Inc.	Lord Potential		\$1,673
Nonpriority Creditor's Name 2211 NORTH FIRST STREET	Last 4 digits of account number When was the debt incurred?		φ1,07
San Jose, CA 95131  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
■ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
■ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Accounts I	Due	

Official Form 106 E/F Schedule E/F: Creditor

Schedule E/F: Creditors Who Have Unsecured Claims Page 10 of 12

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	or 2 Michelle Ann Kaiser  Michelle Ann Kaiser		Case number (if know)	
4.2 2	Retinol Diagnostic Center	Last 4 digits of account number		\$633.00
	Nonpriority Creditor's Name 3395 S. BASCOM AVE., STE 140	When was the debt incurred?		
	Campbell, CA 95008			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Accounts I		
4.2				
3	SYNCB/Texaco	Last 4 digits of account number	7960	\$315.00
	Nonpriority Creditor's Name Attn: Bankruptcy		Opened 07/89 Last Active	
	Po Box 965064	When was the debt incurred?	8/10/17	
	Orlando, FL 32896		0/10/11	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u> </u>	☐ Student loans		
	Check if this claim is for a community debt	<u> </u>	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	iration agreement of divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	<u> </u>	
4.0				
4.2	US Bank/Rms CC Nonpriority Creditor's Name	Last 4 digits of account number	9740	\$6,466.00
	Card Member Services		Opened 06/16 Last Active	
	Po Box 108	When was the debt incurred?	6/30/17	
	St Louis, MO 63166			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	_			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	

■ No

☐ Yes

Other. Specify Credit Card

57

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

Debtor 1	Robert James Kaiser
Debtor 2	Michelle Ann Kaiser

Case number (if kno	ow)
---------------------	-----

Bank/Macy's	Last 4 digits of account number	4970	\$3,532.00
Nonpriority Creditor's Name  Attn: Bankruptcy		Opened 07/98 Last Active	
Po Box 8053	When was the debt incurred?	7/18/17	
Mason, OH 45040			
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		ration agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	18,090.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	18,090.00
				Total Claim
6f.	Student loans	6f.	\$	31,712.00
6g.	Obligations arising out of a separation agreement or divorce that	0	<b>C</b>	0.00
6h		-	· -	
	• • • •		<b>&gt;</b>	0.00
ы.	here.	ы.	\$	116,001.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	147,713.00
	6b. 6c. 6d. 6e. 6f. 6g. 6h. 6i.	<ul> <li>6b. Taxes and certain other debts you owe the government</li> <li>6c. Claims for death or personal injury while you were intoxicated</li> <li>6d. Other. Add all other priority unsecured claims. Write that amount here.</li> <li>6e. Total Priority. Add lines 6a through 6d.</li> <li>6f. Student loans</li> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other similar debts</li> <li>6i. Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ul>	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d.	6a. Domestic support obligations  6a. \$  6b. Taxes and certain other debts you owe the government  6c. Claims for death or personal injury while you were intoxicated  6c. \$  6d. Other. Add all other priority unsecured claims. Write that amount here.  6d. \$  6e. Total Priority. Add lines 6a through 6d.  6f. Student loans  6f. \$  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other similar debts  6i. Other. Add all other nonpriority unsecured claims. Write that amount here.  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$  \$

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert James Ka	iser		
	First Name	Middle Name	Last Name	
Debtor 2	Michelle Ann Kai	ser		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF CALIFORNIA	
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		Olato	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

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Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

Best Case Bankruptcy

Doc# 1

Entered: 10/25/17 11:36:06

Fill in this	s information to identify your	case:			
Debtor 1	Robert James Ka	iser  Middle Name	Last Name		
Debtor 2	Michelle Ann Kai		Last Name		
(Spouse if, fil		Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF	CALIFORNIA		
Case num	nber				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
people are ill it out, a	e filing together, both are equ	ally responsible for supplyin boxes on the left. Attach the	ng correct informat	ion. If more space is n	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, do n	ot list either spouse	as a codebtor.	
□ No ■ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana				states and territories include
_	. Go to line 3. s. Did your spouse, former spou  ☐ No  ☐ Yes.	ıse, or legal equivalent live wit	h you at the time?		
	In which community state	e or territory did you live?	-NONE-	. Fill in the name ar	nd current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
in lin Form	e 2 again as a codebtor only i	f that person is a guarantor of	or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Andrew Kaiser			☐ Schedule D, lii	ne
	12255 N. Claude Ct. #933			■ Schedule E/F,	
	Northglenn, CO 80241			☐ Schedule G Aes/Nct	
3.2	Andrew Kaiser			☐ Schedule D, lii	ne
	12255 N. Claude Ct. #933			■ Schedule E/F,	
	Northglenn, CO 80241			☐ Schedule G _	
				Aes/Nct	

Lale H: Your Codebtors

Page 1 of 2

Best Case Bankruptcy

Page 34 of Schedule H: Your Codebtors Official Form 106H

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Case: 17-52589 Doc# 1 Filed: 10/25/17 57

**Robert James Kaiser** Debtor 1 Michelle Ann Kaiser

Case number (if known)

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.3	Andrew Kaiser 12255 N. Claude Ct. #933 Northglenn, CO 80241	☐ Schedule D, line ■ Schedule E/F, line4.3 ☐ Schedule G Aes/Nct
3.4	Andrew Kaiser 12255 N. Claude Ct. #933 Northglenn, CO 80241	□ Schedule D, line ■ Schedule E/F, line4.4 □ Schedule G Aes/nvi/jt
3.5	Andrew Kaiser 12255 N. Claude Ct. #933 Northglenn, CO 80241	☐ Schedule D, line ■ Schedule E/F, line4.5 ☐ Schedule G Aes/nvi/jt

Entered: 10/25/17 11:36:06 Page 35 of Schedule H: Your Codebtors Official Form 106H Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com

Case: 17-52589 Doc# 1 Filed: 10/25/17

Debtor 1	Robert Jame	es Kaiser		
Debtor 2 (Spouse, if filir	Michelle An	n Kaiser		
United Sta	tes Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF CALIFORNIA	
Case numl (If known)	per		-	Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chap
Officia	ll Form 1061			13 income as of the following date:  MM / DD/ YYYY
e as com upplying pouse. If ttach a se	correct information. If you you are separated and you	sible. If two married peo are married and not fili or spouse is not filing wi	ng jointly, and your spouse is living ith you, do not include information	nd Debtor 2), both are equally responsible on the properties of th
Be as com supplying of pouse. If y ttach a se Part 1:	plete and accurate as poss correct information. If you you are separated and you parate sheet to this form.	sible. If two married peo are married and not fili or spouse is not filing wi	ng jointly, and your spouse is living ith you, do not include information	nd Debtor 2), both are equally responsible on the properties of th
Be as com upplying pouse. If ttach a se  Part 1:  1. Fill in infori	plete and accurate as possocorrect information. If you you are separated and you parate sheet to this form.  Describe Employment a your employment mation.  have more than one job,	sible. If two married peo are married and not fili ir spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livir ith you, do not include information onal pages, write your name and	nd Debtor 2), both are equally responsible in ing with you, include information about your in about your spouse. If more space is need case number (if known). Answer every que
Be as com upplying pouse. If y ttach a se  Part 1:  1. Fill in infor  If you attach	plete and accurate as possocorrect information. If you you are separated and you parate sheet to this form.  Describe Employment a your employment mation.  have more than one job, a separate page with mation about additional	sible. If two married peo are married and not fili or spouse is not filing wi	ng jointly, and your spouse is livir ith you, do not include information onal pages, write your name and Debtor 1	nd Debtor 2), both are equally responsible in gwith you, include information about your about your spouse. If more space is need case number (if known). Answer every question about your 2 or non-filing spouse
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Be as com upplying pouse. If y ttach a se  Part 1:  1. Fill in infor  If you attach inform emplo	plete and accurate as possocorrect information. If you you are separated and you parate sheet to this form.  Describe Employment a your employment mation.  have more than one job, a separate page with mation about additional	sible. If two married peo are married and not filin ir spouse is not filing wi On the top of any additi	ng jointly, and your spouse is livir ith you, do not include information onal pages, write your name and  Debtor 1  Employed  Not employed	nd Debtor 2), both are equally responsible in gwith you, include information about your about your spouse. If more space is need case number (if known). Answer every question about your spouse of the property of the proper
Be as com upplying pouse. If y ttach a se  Part 1:  1. Fill in inform If you attach inform emplo Includ self-e Occup	plete and accurate as possicorrect information. If you you are separated and you parate sheet to this form.  Describe Employment a your employment mation.  have more than one job, a separate page with nation about additional overs.  de part-time, seasonal, or	sible. If two married peo are married and not filing ir spouse is not filing wi On the top of any additi Employment status	ng jointly, and your spouse is livir ith you, do not include information onal pages, write your name and  Debtor 1  Employed  Not employed  R&D Scientist	nd Debtor 2), both are equally responsible in gwith you, include information about your about your spouse. If more space is need case number (if known). Answer every question about your spouse of the property of the proper

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay. 3.

Calculate gross Income. Add line 2 + line 3.

non-filing spouse 13,599.34 0.00 3. 0.00 +\$ 0.00 13,599.34 4. \$ 0.00

For Debtor 2 or

For Debtor 1

Official Forn Coase: 17-52589 Doc# 1 Filed: 10/25% 17 11:36:06 Page 36 of page 1

Debtor 1
Debtor 2
Robert James Kaiser
Michelle Ann Kaiser

Case number (if known)

8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ 0.00  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8e. Social Security  8e. \$ 0.00 \$ 0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  8g. Pension or retirement income  8g. \$ 0.00 \$ 0.00  Other monthly income. Specify: Bonus averaged monthly: Net  8h. + \$ 400.00 + \$ 0.00							For	Debtor 1		r Debtor		
S. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions for retirement plans  5d. Required repayments of retirement fund loans  5d. Required repayments of the form line 4.  7d. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7d. Sp. Sp. Sp. 3d. 0.00  7d. Calculate income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Alliach a statement for each property and business showing gross  7d. Repayments of the received repayments have a statement for each property and business showing gross  7d. Repayments of the repayments have a statement for each property and business showing gross  8d. List all other income regularly receive line due to a statement of the capture of the load line only, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  9d. \$ 0.00  9d. \$ 0.00 \$ 0.00  9d. \$ 0.00  9d. \$ 0.00  9d		Сору	/ line 4 here			4.	\$	13,599.34		i-iiiiig s	•	
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5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5id+5e+5ih. 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5id+5e+5ih. 6. \$5,907.94 \$0.00  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$7,691.40 \$0.00  8. List all other income regularly received: 8. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8l. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8nous provided the program of housing subsidies. Specify: 8nous provided the program of housing su												
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Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5d+5e+5f+5g+5h.  Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5d+5e+5f+5g+5h.  Calculate total monthly take-home pay. Subtract line 6 from line 4.  Add lines for metal property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. So 0.00 \$ 0.00  8. Social Security  8f. Other government assistance that you regularly receive linclude cash assistance and the value (if known) of any non-cash assistance hat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify: Bonus averaged monthly: Net 8h. \$ 0.00 \$ 0.00  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  S 0.00  Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		-					· -		, <del>*</del> –			
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8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8g. Pension or retirement income  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies					Ğ		· —		· -			
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8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ 0.00  Nother monthly income. Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  Bonus averaged monthly: Net 8h. \$ 400.00 \$ 0.00  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  10. Calculate monthly income. Add line 7 + line 9.  Add the regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  8b. \$ 0.00 \$ 0.00  \$	8.		Net income from profession, or f Attach a statement receipts, ordinary	m rental property arm ent for each prope y and necessary b	and from operating a business, rty and business showing gross	8a.	\$	0.00	\$		0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ 0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8ound all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 400.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 8,091.40  13. Do you expect an increase or decrease within the year after you file this form?		8h	•				· · —					
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8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. \$0.00 \$0.00  8g. Pension or retirement income 8h. Other monthly income. Specify:  Bonus averaged monthly: Net 8h.+ \$400.00 + \$0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$400.00 \$0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.				•			· ·					
8h. Other monthly income. Specify: Bonus averaged monthly: Net 8h. \$ 400.00 + \$ 0.00  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Specify:  13. Do you expect an increase or decrease within the year after you file this form?  No.			Other government Include cash assistat you receive, Nutrition Assista	ent assistance the sistance and the value of such as food star	alue (if known) of any non-cash assist	tance I	· <u> </u>		· <u> </u>			
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 400.00 \$ 0.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.		8g.	Pension or retir	ement income		8g.	\$	0.00	\$		0.00	
10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.		8h.	Other monthly i	income. Specify:	Bonus averaged monthly: Net	8h.+	\$	400.00	+ \$ _		0.00	
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11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  13. Do you expect an increase or decrease within the year after you file this form?  No.			-							- 0.00		5,551115
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 8,091.40  Combined monthly income  No.	11.	State Include other Do no	e all other regular de contributions fr friends or relative ot include any amo	r contributions to om an unmarried es.	the expenses that you list in Sche partner, members of your household,	your depend						0.00
monthly income  13. Do you expect an increase or decrease within the year after you file this form?  ■ No.	12.	Write	that amount on the								\$	8,091.40
13. Do you expect an increase or decrease within the year after you file this form?  No.												
☐ Yes. Explain:	13.	Do y∉	•	rease or decreas	e within the year after you file this	form?					monthly	y income
			Yes. Explain:									

Fill	in this informa	ation to identify yo	ur case:						
Deb	otor 1	Robert Jame	s Kaise	r .		Ch		this is: amended filing	
	otor 2 ouse, if filing)	Michelle Ann	ı Kaiser				As	upplement show	wing postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the:	: NORTI	HERN DISTRICT OF CALI	FORNIA		MN	I / DD / YYYY	
1	se number								
O	fficial Fo	orm 106J							
S	chedule	J: Your I	 Exper	nses					12/1
info	ormation. If n mber (if know  rt 1: Desc  Is this a joi  No. Go t	nore space is ne vn). Answer ever ribe Your House nt case?	eded, atta ry question shold						
	■ N							_	
	ЦΥ	res. Debtor 2 mus	it file Offic	ial Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor	2.	
2.	Do you hav	e dependents?	■ No						
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?
	Do not state dependents						_ _ _		□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes
3.	expenses of	penses include of people other tl nd your depende	han _	No l Yes					☐ Yes
Est	timate your e	a date after the b	our bankr	ly Expenses uptcy filing date unless y cy is filed. If this is a supp	ou are using this fo elemental <i>Schedule</i>	rm as a s <i>J</i> , check	suppl the b	ement in a Cha	apter 13 case to report of the form and fill in the
the		h assistance and		government assistance i cluded it on <i>Schedule I:</i> \				Your exp	enses
4.		or home owners		nses for your residence. I or lot.	nclude first mortgage	4.	\$_		3,350.00
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
		erty, homeowner's				4b.			100.00
		e maintenance, re eowner's associat		upkeep expenses dominium dues		4c. 4d.	:		0.00 0.00
5.				our residence, such as ho	me equity loans	5.			0.00

Official Form 106J Schedule J: Your Expenses
Case: 17-52589 Doc# 1 Filed: 10/25/17 Entered: 10/25/17 11:36:06 Page 38 of

5. \$

**Robert James Kaiser** Debtor 1 Debtor 2 Michelle Ann Kaiser Case number (if known) **Utilities:** 6a. Electricity, heat, natural gas 6a. \$ 100.00 6b. Water, sewer, garbage collection 6b. \$ 0.00 Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 6c. 350.00 6d. Other. Specify: 6d. \$ 0.00 Food and housekeeping supplies 7. \$ 500.00 Childcare and children's education costs 8. \$ 0.00 Clothing, laundry, and dry cleaning 9. \$ 65.00 Personal care products and services 10. \$ 25.40 Medical and dental expenses 11. \$ 600.00 12. Transportation. Include gas, maintenance, bus or train fare. 150.00 12. \$ Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 50.00 14. Charitable contributions and religious donations 50.00 Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$ 191.00 15b. Health insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 180.00 15d. Other insurance. Specify: 15d. \$ 0.00 16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20. 16. \$ 0.00 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 419.00 17b. Car payments for Vehicle 2 17b. \$ 261.00 17c. Other. Specify: 17c. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 18. Your payments of alimony, maintenance, and support that you did not report as 0.00 18. \$ deducted from your pay on line 5, Schedule I. Your Income (Official Form 106I). 500.00 19. Other payments you make to support others who do not live with you. Specify: Support to Kids 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 20b. Real estate taxes 0.00 20c. \$ 20c. Property, homeowner's, or renter's insurance 0.00 20d. \$ 20d. Maintenance, repair, and upkeep expenses 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 21. Other: Specify: 21. +\$ 0.00 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 6,891.40 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 6,891.40 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 8,091.40 23b. Copy your monthly expenses from line 22c above. 23b. -\$ 6,891.40 Subtract your monthly expenses from your monthly income. 1.200.00 23c. The result is your monthly net income.

#### 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

■ No.	
☐ Yes.	Explain here:

Official Form 106J Schedule J: Your Expenses

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page 2

Fill in this infor	mation to identify your	case:			
Debtor 1	Robert James Kai	iser			
	First Name	Middle Name	Las	t Name	
Debtor 2	Michelle Ann Kais	ser			
(Spouse if, filing)	First Name	Middle Name	Las	t Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF CALIFO	DRNIA	
Case number					
(if known)					☐ Check if this is an amended filing
Official Form Declarat		n Individual	Debt	or's Schedules	12/15
If two married p	eople are filing together	, both are equally respon	sible for s	upplying correct information.	
obtaining mone		connection with a bankı		ed schedules. Making a false state e can result in fines up to \$250,00	
Sig	n Below				
Did you pa	ay or agree to pay some	one who is NOT an attorn	ney to help	you fill out bankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
				Socialion	, a signaturo (Gillotai i Gilli 110)
	alty of perjury, I declare to the true and correct.	that I have read the sumn	nary and s	chedules filed with this declaration	on and
X /s/ Rol	bert James Kaiser		х	/s/ Michelle Ann Kaiser	
Rober	t James Kaiser ure of Debtor 1			Michelle Ann Kaiser Signature of Debtor 2	

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

Date October 25, 2017

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Date **October 25, 2017** 

Best Case Bankruptcy

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Fil	l in this inform	ation to identify you	r case:			
Dε	btor 1	Robert James K	aiser			
		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	Michelle Ann Ka	Middle Name	Last Name		
.						
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT (	DE CALIFORNIA		
	se number				П	Check if this is an
(					_	amended filing
O	fficial For	m 107				
St	atement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16
					equally responsible for sup	
		). Answer every que:		this form. On the top of an	y additional pages, write yo	ur name and case
Pa	rt 1: Give De	etails About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is your	current marital statu	ıs?			
	_	ourrone maritar otate				
	■ Married □ Not marri	ind.				
	☐ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	□ No					
	Yes. List	all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Price	or Address:	Dates Debtor 1	Debtor 2 Prior Ac	ldress:	Dates Debtor 2
	4503 Carlyl	le Ct.	lived there From-To:	■ Same as Debtor	4	lived there  ■ Same as Debtor 1
		a, CA 95054	06/14 - 06/16	Same as Debior	I	From-To:
•	Milde to the Le					2 / 0
3. stat					ity property state or territor ico, Texas, Washington and V	
	□ No					
	_	ke sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income			
4.					ear or the two previous cale	endar years?
			u received from all jobs and a have income that you receiv			
	□ No					
	_	in the details.				
		ure detaile.	Dalifar 4		Dalifari O	
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income
			Check all that apply.	(before deductions and	Check all that apply.	(before deductions
				exclusions)		and exclusions)
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$119,821.00	■ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Official Form 107

		Debtor 1		Debtor 2	
		Sources of income Check all that apply.		Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	endar year: to December 31	, <b>2016</b> ) Wages, commiss bonuses, tips	ions, \$155,446.00	■ Wages, commissions, bonuses, tips	\$23,763.0
		☐ Operating a busing	ness	Operating a business	
	ndar year befor o December 31		ions, \$154,321.00	☐ Wages, commissions, bonuses, tips	\$18,113.0
		☐ Operating a busing	ness	Operating a business	
winnings List each	s. If you are filing	a joint case and you have incom gross income from each source	ne; interest; dividends; money collected that you received together, list it conserted. Do not include income to	only once under Debtor 1.	ы уанышу ана юте
		<b>Sources of income</b> Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deduction and exclusions)
	endar year: to December 31,	IRA , 2016 )	\$54,241.00		
January 1 t		, 2016 ) re that: IRA	\$54,241.00 \$6,726.00		
January 1 t	o December 31	, 2016 ) re that: IRA	•		
January 1 t or the cale	o December 31	re that: IRA , 2015)	\$6,726.00		
January 1 t or the cale January 1 t	o December 31 endar year befor o December 31	re that: IRA Pension Royalties	\$6,726.00 \$36,866.00 \$11,853.00		
anuary 1 to the cale anuary 1 to the cale anuary 1 to the cart 3:	endar year befor to December 31, set Certain Paym er Debtor 1's or Neither Debt	Pension Royalties  Pents You Made Before You Filer Debtor 2's debts primarily contact the second sec	\$6,726.00 \$36,866.00 \$11,853.00 ed for Bankruptcy nsumer debts?	s are defined in 11 U.S.C. § 10	01(8) as "incurred by
art 3: Li	endar year befor to December 31, set Certain Paymer Debtor 1's or Neither Debt individual pring the 90    No. 0    No. 0	Pension  Royalties  Pents You Made Before You File  r Debtor 2's debts primarily color 1 nor Debtor 2 has primarily for a personal, family, or he do days before you filed for bankru Go to line 7.	\$6,726.00 \$36,866.00 \$11,853.00  ed for Bankruptcy  nsumer debts? consumer debts. Consumer debts pusehold purpose."  ptcy, did you pay any creditor a total	I of \$6,425* or more?	
art 3: Li	endar year befor to December 31:  set Certain Paymer Debtor 1's or Neither Debtor 1's or Individual print During the 90  No. Or Yes L	Pension  Royalties  Pension  Royalties  Pension  Royalties  Pension  Royalties  Pension  And Before You Fill  To Debtor 2's debts primarily contended for a personal, family, or here And days before you filed for bankrutes  To to line 7.  List below each creditor to whom the point include payments to an attorn	\$6,726.00 \$36,866.00 \$11,853.00  ed for Bankruptcy  nsumer debts? consumer debts. Consumer debts busehold purpose."  ptcy, did you pay any creditor a total you paid a total of \$6,425* or more is payments for domestic support oblige ey for this bankruptcy case.	I of \$6,425* or more?  n one or more payments and a pations, such as child support a	the total amount you and alimony. Also, do
or the cale lanuary 1 t  art 3: Li  Are eith  No.	endar year befor to December 31.  st Certain Paymer Debtor 1's on Neither Debt individual prin During the 90	Pension  Royalties	\$6,726.00 \$36,866.00 \$11,853.00  ed for Bankruptcy  nsumer debts?  consumer debts. Consumer debts  busehold purpose."  ptcy, did you pay any creditor a total  you paid a total of \$6,425* or more is  payments for domestic support oblig  ey for this bankruptcy case.  3 years after that for cases filed on	I of \$6,425* or more?  n one or more payments and a pations, such as child support a	the total amount you and alimony. Also, do
January 1 to the cale January 1 to January 1	endar year befor to December 31.  st Certain Paymer Debtor 1's on Neither Debt individual prin During the 90 No. Compared Yes Less Subject to a second to the second to th	Pension  Royalties  Pensio	\$6,726.00 \$36,866.00 \$11,853.00  ed for Bankruptcy  nsumer debts?  consumer debts. Consumer debts  busehold purpose."  ptcy, did you pay any creditor a total  you paid a total of \$6,425* or more is  payments for domestic support oblig  ey for this bankruptcy case.  3 years after that for cases filed on	I of \$6,425* or more?  n one or more payments and a lations, such as child support a or after the date of adjustmen	the total amount you and alimony. Also, do
or the cale January 1 t  art 3: Li  Are eith  No.	endar year befor to December 31:  set Certain Paymer Debtor 1's or Neither Debtindividual prindividual prindi	Pension  Royalties  Pensio	\$6,726.00 \$36,866.00 \$11,853.00  ed for Bankruptcy  nsumer debts?  consumer debts. Consumer debte busehold purpose."  ptcy, did you pay any creditor a total you paid a total of \$6,425* or more is busehold purpose. Support oblige ey for this bankruptcy case. 3 years after that for cases filed on consumer debts.	I of \$6,425* or more?  n one or more payments and a lations, such as child support a or after the date of adjustmen	the total amount you and alimony. Also, do

Official Form 107

attorney for this bankruptcy case.

	otor 2		Cas	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438	Monthly	\$419.00	\$11,653.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ☐ Other	rd ayment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general poor which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any gen n control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and ar	u are a genera ny managing ag	I partner; corporation gent, including one fo
	No					
	Yes. List all payments to an insider.  Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
			paid	still owe		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost.  No Yes. List all payments to an insider		ments or transfer a	any property on a	ccount of a de	bt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	this payment tor's name
Pai	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	tcy, were you a party in an	s, divorces, collectio		ctions, support	or custody
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo  No. Go to line 11.  Yes. Fill in the information below.  Creditor Name and Address		erty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?  Value of the property
		Explain what happened	i			property
11.	Within 90 days before you filed for bankru accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fir	nancial institution	, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possess			fit of creditors, a

Official Form 107

■ No ☐ Yes

	btor 1 Robert James Kaiser btor 2 Michelle Ann Kaiser	Case number	(if known)	
Par	tt 5: List Certain Gifts and Contributions			
3.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift.	tcy, did you give any gifts with a total value of more t	han \$600 per person?	•
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	Describe the gifts	Dates you gave the gifts	Value
4.	Within 2 years before you filed for bankrup  ■ No  □ Yes. Fill in the details for each gift or con	tcy, did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
0.	or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  In	es or since you filed for bankruptcy, did you lose any escribe any insurance coverage for the loss clude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	tt 7: List Certain Payments or Transfers			
6.	consulted about seeking bankruptcy or pre	cy, did you or anyone else acting on your behalf pay or caparing a bankruptcy petition? coarers, or credit counseling agencies for services required		ty to anyone you
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Law Offices of W. Kirk Moore, Inc. 586 N. First St. Suite 202 San Jose, CA 95112 wkmoore@bayareabk.com	Attorney Fees	08/17	\$537.00
	CIN LEGAL Credit Info Net 4540 Honeywell Court Dayton, OH 45424	Credit Report	08/17	\$53.00

	otor 1 otor 2	Robert James Kaiser Michelle Ann Kaiser				Ca	ase number (	if known)		
17.	promi	n 1 year before you filed for bankrupto ised to help you deal with your credito of include any payment or transfer that you	rs or	to make payment				r transfer any prop	erty t	o anyone who
	Yes. Fill in the details.									
	Pers Addr	on Who Was Paid ress		Description and transferred	value of any pr	roper	rty	Date payment or transfer was made		Amount of payment
18.	Includinclud	n 2 years before you filed for bankrupt ferred in the ordinary course of your b le both outright transfers and transfers ma le gifts and transfers that you have alread No Yes. Fill in the details.	usine ade a	ess or financial aff s security (such as	airs? the granting of					
	Person Who Received Transfer Address			Description and property transfer				any property or received or debts change		ate transfer was ade
19.	Person's relationship to you  Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.									
	Name of trust Description and value of the property transferred							ate Transfer was ade		
Par	t 8:	List of Certain Financial Accounts, Ins	strum	nents. Safe Deposi	it Boxes, and S	Stora	ae Units			udo
	Within sold, Include house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, asso No	y, we	ere any financial ac	ccounts or inst	trume	ents held in		-	
	Nam	Yes. Fill in the details. e of Financial Institution and ress (Number, Street, City, State and ZIP		ast 4 digits of Type of account or ccount number instrument		clo mo	te account was sed, sold, ved, or	ł	Last balance pefore closing or transfer	
	T. Rowe Price Trust Co. PO Box 17302 Baltimore, MD 21297		XXX	XXXX- Checking Savings Money Market Brokerage Other IRA		06/	nsferred 116		\$4,241.00	
21.		ou now have, or did you have within 1 y or other valuables?	ear l	pefore you filed fo	r bankruptcy, a	any s	safe deposit	box or other depos	sitory	for securities,
	_	No								
	☐ Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)			Who else had access to it?  Address (Number, Street, City, State and ZIP Code)						Do you still have it?

Official Form 107

22.	Hav	e you stored property in a storage unit or p	lace other than your home within	1 ye	ar before you filed for bankruptcy	?			
		No							
		Yes. Fill in the details.							
	Nai	me of Storage Facility	Who else has or had access	De	escribe the contents	Do you still			
		dress (Number, Street, City, State and ZIP Code)	to it?			have it?			
			Address (Number, Street, City, State and ZIP Code)						
			•						
Part	9:	Identify Property You Hold or Control for	Someone Else						
		you hold or control any property that some someone.	one else owns? Include any prope	erty y	ou borrowed from, are storing for	, or hold in trust			
	_								
	_	No							
	u -	Yes. Fill in the details.							
	_	rner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	escribe the property	Value			
Par	10:	Give Details About Environmental Inform	nation						
For t	he p	ourpose of Part 10, the following definitions	s apply:						
		rironmental law means any federal, state, or		_	•				
		c substances, wastes, or material into the a ulations controlling the cleanup of these su		nawa	iter, or other mealum, including st	atutes or			
	Site	means any location, facility, or property as	defined under any environmenta	ıl law	, whether you now own, operate, o	or utilize it or used			
_		wn, operate, or utilize it, including disposal ardous material means anything an enviror			acto bazardous substance toxios	substance			
		ardous material, pollutant, contaminant, or		us wa	aste, Hazardous substance, toxic s	substance,			
Repo	ort a	II notices, releases, and proceedings that y	ou know about, regardless of who	en th	ey occurred.				
24.	Has	any governmental unit notified you that yo	u may be liable or potentially liab	le un	der or in violation of an environme	ental law?			
	_	■ Ma							
	_	No Yes. Fill in the details.							
	ப Na	me of site	Covernmental unit		Environmental law, if you	Date of notice			
		dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	and	know it	Date of notice			
25.	Hav	e you notified any governmental unit of any	y release of hazardous material?						
		No							
	_	Yes. Fill in the details.							
	<u> —</u> Nai	me of site	Governmental unit		Environmental law, if you	Date of notice			
		dress (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State a ZIP Code)	and	know it	Date of Hotice			
26.	Hav	e you been a party in any judicial or admini	strative proceeding under any en	viron	mental law? Include settlements a	and orders.			
	_	No							
		Yes. Fill in the details.							
	Cas	se Title	Court or agency	Na	ature of the case	Status of the			
	Cas	se Number	Name Address (Number, Street, City, State and ZIP Code)			case			
Par	11:	Give Details About Your Business or Cor	,						
27	\A/:+:		did you own a by-since on be	<b></b>	f the fellowing connections to an	, husings-0			
۷1.	vviti	nin 4 years before you filed for bankruptcy,	•	•	· ·	, pusiness?			
		☐ A sole proprietor or self-employed in a	· · · · · · · · · · · · · · · · · · ·	•	•				
		☐ A member of a limited liability company	y (LLC) or limited liability partners	ship (	LLP)				
Officia	al Foi	rm 107 Statement	of Financial Affairs for Individuals Fili	ng for	Bankruptcy	page			

	otor 1 otor 2	Robert James Kaiser Michelle Ann Kaiser		Case number (if known)				
		☐ A partner in a partnership ☐ An officer, director, or managing exc	•					
	<b>-</b>	<ul><li>□ An owner of at least 5% of the voting</li><li>No. None of the above applies. Go to F</li><li>Yes. Check all that apply above and fill</li></ul>	Part 12.					
	Add	Siness Name dress nber, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.  Dates business existed				
28.	insti	in 2 years before you filed for bankrupt tutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement t	to anyone about your business? Include all financial				
	Name Address (Number, Street, City, State and ZIP Code)		Date Issued					
I hav	Part 12: Sign Below  I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.							
/s/ Ro	Robe	§§ 152, 1341, 1519, and 3571.  ert James Kaiser  James Kaiser e of Debtor 1	/s/ Michelle Ann Kaiser Michelle Ann Kaiser Signature of Debtor 2					
Did ■ N	Date October 25, 2017  Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  ■ No □ Yes							
<b>■</b> N	10	pay or agree to pay someone who is not	, ,,					

## United States Bankruptcy Court Northern District of California

	Northern District of Cantori	nıa		
In re	Robert James Kaiser Michelle Ann Kaiser	Case No.		
	Debtor(s)	Chapter	13	
	STATEMENT PURSUANT TO RU	<b>LE 2016(B)</b>		
The und	dersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:			
1.	The undersigned is the attorney for the debtor(s) in this case.			
2.	The compensation paid or agreed to be paid by the debtor(s), to the a) For legal services rendered or to be rendered in contemporation with this case		\$	5,300.00
	b) Prior to the filing of this statement, debtor(s) have paid		\$ \$ \$	537.00
	c) The unpaid balance due and payable is		\$	4,763.00
3.	\$310.00_ of the filing fee in this case has been paid.			
5.	<ul> <li>whether to file a petition under title 11 of the United States</li> <li>b. Preparation and filing of the petition, schedules, statement of court.</li> <li>c. Representation of the debtor(s) at the meeting of creditors.</li> <li>The source of payments made by the debtor(s) to the undersigned was revices performed, and</li> </ul>	of affairs and other		
5.	The source of payments to be made by the debtor(s) to the undersig will be from earnings, wages and compensation for services perform		balance rema	aining, if any,
7.	The undersigned has received no transfer, assignment or pledge of p for the value stated:	property from debt	or(s) except t	he following
3.	The undersigned has not shared or agreed to share with any other enundersigned's law firm, any compensation paid or to be paid except appearance counsel in an amount not to exceed \$125.00 per appearancharge to debtor(s).	as follows: I may	share fees wit	h special
Dated:	October 25, 2017 Respectfully su	bmitted,		
	/s/ W. Kirk Moor	Δ.		

Attorney for Debtor: W. Kirk Moore Law Offices of W. Kirk Moore, Inc. 586 N. First St. Suite 202 San Jose, CA 95112

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

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## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF CALIFORNIA

In re	Robert James Kaiser Michelle Ann Kaiser	Case No.
	Debtor(s).	/
	CREDIT	OR MATRIX COVER SHEET
-		Mailing Matrix, consisting of <u>4</u> sheets, contains the correct, of all priority, secured and unsecured creditors listed in debtor's e Clerk's promulgated requirements.
DATE	ED: October 25, 2017	
		/s/ W. Kirk Moore
		Signature of Debtor's Attorney or Pro Per Debtor

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Best Case Bankruptcy

Case: 17-52589 Doc# 1 Filed: 10/25/17 Entered: 10/25/17 11:36:06 Page 53 of

Aes/Nct Aes/Ddb Po Box 8183 Harrisburg, PA 17105

Aes/nvi/jt Pob 61047 Harrisburg, PA 17106

Ally Financial Attn: Bankruptcy Po Box 380901 Bloomington, MN 55438

Amex Correspondence Po Box 981540 El Paso, TX 79998

Andrew Kaiser 12255 N. Claude Ct. #933 Northglenn, CO 80241

Attorney General U.S. Dept. of Justice P.O. Box 683, Ben Franklin Station Washington, DC 20044

Bank Of America Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410

Cbusasears Citicorp Credit Srvs/Centralized Bankrup Po Box 790040 Saint Louis, MO 63179

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Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Chief Counsel Franchise Tax Board c/o General Counsel Section PO Box 1720 MS: A-260 Rancho Cordova, CA 95741-1720

Citicards Cbna Citicorp Credit Svc/Centralized Bankrupt Po Box 790040 Saint Louis, MO 63179

Comenity Bank/Pottery Barn Po Box 182125 Columbus, OH 43218

Comenity/Crate & Barrell Comenity Bank Po Box 182125 Columbus, OH 43218

Credit First National Assoc Attn: BK Credit Operations Po Box 81315 Cleveland, OH 44181

Discover Financial Po Box 3025 New Albany, OH 43054

Franchise Tax Board PIT Bankruptcy MS: A-340 PO Box 2952 Sacramento, CA 95812

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Good Samaritan Hospital 1225 WILSHIRE BLVD Los Angeles, CA 90017

Internal Revenue Service Centralized Insolvency Division P.O. Box 7346 Philadelphia, PA 19101

Nordstrom Signature Visa Colorado Service Center Po Box 6555 Englewood, CO 80155

NPAS, Inc. ONE PARK PLZ Nashville, TN 37203

Paypal, Inc. 2211 NORTH FIRST STREET San Jose, CA 95131

Retinol Diagnostic Center 3395 S. BASCOM AVE., STE 140 Campbell, CA 95008

SYNCB/Texaco Attn: Bankruptcy Po Box 965064 Orlando, FL 32896

U.S. Attorney Northern District of California 10th Floor, Federal Building Box 10502, 450 Golden Gate Ave. San Francisco, CA 94102

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US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166

Visa Dept Store National Bank/Macy's Attn: Bankruptcy Po Box 8053 Mason, OH 45040

Wells Fargo Dealer Services PO Box 19657 Irvine, CA 92623

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